

Testimony

Senate Bill 2189

House Human Services Committee

Wednesday, February 23, 2005; 2:30 p.m.

North Dakota Department of Health

Good afternoon, Chairman Price and members of the House Human Services Committee. My name is Heather Weaver, and I am program manager of the North Dakota Immunization Program for the North Dakota Department of Health. I am here today to testify in support of Senate Bill 2189.

The amendments proposed in Senate Bill 2189 remove the requirement of written or verbal consent for the exchange of immunization information to certain entities, but limit the release to the dates and types of immunization.

This bill has been proposed because of the inconvenience it results for health-care providers, schools and child-care providers who have a "need to know" an individual's immunization status because of statutory immunization requirements, and for the administration of necessary and appropriate medical care.

North Dakota law requires certain immunizations for children in day-care facilities and schools. Medical facilities also require that their staff receive certain immunizations for protection of both staff and patients. The North Dakota Department of Health and health-care providers frequently receive requests for a person's immunization history from child-care facilities, schools, public health agencies and health-care providers. The current consent requirement is inconvenient for the requestor and can result in exclusion of children from school or child care because of the delay in obtaining immunization information.

In addition, it is important not only that people are immunized, but also that they receive their immunizations according to prescribed schedules and recommendations. Unavailable immunization information can result in people receiving unnecessary immunizations, which also can lead to serious side effects. Health-care providers have expressed their frustration at not being able to receive or provide necessary, prompt immunization information because of the current requirement of having the patient's verbal or written consent. In fact, one of North Dakota's leading medical centers requested the amendment be introduced to allow them to expediently exchange immunization information.

All of us involved in health care recognize the need to maintain confidentiality of sensitive health information, which is reinforced by guidelines and requirements under HIPAA

privacy rules. The changes to this legislation limit the information to be released to only the dates and types of immunizations.

Removing the portion of the current law requiring verbal or written consent for release of immunization information will help ensure that people receive prompt, efficient and necessary medical care and that immunization information can be provided expediently when necessary to those who have a need to know.

This concludes my testimony. I am happy to answer any questions you may have.